

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 48 | 10/31/01 |
| FORMALITY REVIEW | JP | 1056 | 11-28-02 |

Resp

M.D.

INDEX OF CLAIMS

08-14-02

04-10-02

Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 6/20/02 |
| 2 | 8/19/03 |
| 3 | |
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| 24 | |
| 25 | |
| 26 | |
| 27 | N |
| 28 | N |
| 29 | |
| 30 | |
| 31 | |
| 32 | |
| 33 | |
| 34 | |
| 35 | |
| 36 | N |
| 37 | N |
| 38 | N |
| 39 | |
| 40 | |
| 41 | |
| 42 | |
| 43 | |
| 44 | |
| 45 | |
| 46 | |
| 47 | |
| 48 | N |
| 49 | N |
| 50 | N |

| Claim | Date |
|----------------|---------|
| Final Original | |
| 51 | 5/30/02 |
| 52 | 3/14/03 |
| 53 | |
| 54 | |
| 55 | |
| 56 | |
| 57 | N |
| 58 | N |
| 59 | N |
| 60 | |
| 61 | N |
| 62 | |
| 63 | N |
| 64 | N |
| 65 | |
| 66 | N |
| 67 | |
| 68 | |
| 69 | |
| 70 | N |
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| 93 | |
| 94 | |
| 95 | |
| 96 | N |
| 97 | |
| 98 | |
| 99 | |
| 100 | |

| Claim | Date |
|----------------|------|
| Final Original | |
| 110 | |
| 112 | |
| 113 | |
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| 150 | |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet her

(LEFT INSIDE)

11/28/04
 11/28/04
 11/28/04
 11/28/04